

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>m</i>	<i>32</i>	<i>4/24</i>
FORMALITY REVIEW	<i>AM</i>	<i>917</i>	<i>05-03-01</i>
RESPONSE FORMALITY REVIEW	<i>A.M</i>	<i>JC 58D</i>	<i>08-11-01</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 + (Through numeral)..... Canceled
 + Resitiated
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
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41	✓
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45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final Original	
51	✓
52	✓
53	✓
54	✓
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56	✓
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Claim	Date
Final Original	
101	✓
102	✓
103	✓
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139	✓
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142	✓
143	✓
144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

5/6/01
5/8/01
5/10/01